

NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS) Please read the instruction before completing. Attach additional sheets if necessary. DEC 2 1 2009

COMMISSION

PERSONAL INFORMATION:					ONET	HICS
NAME: 3-07/ Henrile)	LEN	IGTH OF RESI	DENCE IN NE	VADA:		
ADDRESS: 140 State Route	708					
Y, STATE, ZIP: UEVA CON LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE:						
TELEPHONE: 775-364-3308	E-M	AIL:	hunt'l	'x \iba	DVak	100.0
SECTION A (Public Office): List all public offices for which this and check each box accordingly i.e. annual, candidate or appoi	financial discl	osure statem	ent is require	_		
Title of Public Office and Name of Government	Elected, appointed or appointed to elected (E,A, AE)	Anrual Compensation	Date elected or appointed	AMMUAL NRS 281A.600.1 & 281A.610 1	CANDADATE NRS 281A.610.1(a).	APPONITMENT NRS 281A.600.1
				Check the	e appropriate t	xoxes below
Intern Chief	\$					1
North Luan &O. Tise	\$					
Dortis.	\$					
SECTION B (Sources of Income): List each source of your income any member of your household who is 18 years of age or older	. NRS281A.62	20,1(b).			He	ousehold Member appropriate
			A - 14-44-4			
SECTION C (Real Property): List specific location and particular which you or a member of your household has a legal or benefit more; and (3) located in this state or an adjacent state. NRS 28 Specific Location	icial interest; (al estate (oth 2) the fair m	ner than pers arket value o <u>Particular</u>	f which is	dence): (s \$2,500	1) in or

Name of Public Officer:			
aration b (Condition): List peop aradito	r to whom you or a member of your household owes \$5,000 or most on your personal residence; and (2) debt on a motor vehicle for	ore [EXCI personal	EPT: (1) use
retained by seller. NRS 281A.620.1(d).	st off your personal residence, and (2) descent 2 meters and	Self	Household Member
		•	the appropriate boxes
Nonz			
		_	
value of \$200 from a donor during the proyou within the third degree of consanguir anniversary, holiday or other ceremonial administrative, or political action]. NRS 2	of donor and value of each gift if all gifts received are in excess of ecceding taxable year [EXCEPT: (1) a gift received from a person value or affinity; and (2) ceremonial gifts received for a birthday, we occasion if the donor does not have a substantial interest in your 81A.620.1(e).	viio is for Iding,	ə,
GIff	S S		
None	s		
	5		
	\$		
including a proprietorship, partnership, fi	th business entity (i.e., organization or enterprise operated for economism, business, trust joint venture, syndicate, corporation or associated as a trustee, beneficiary of a trust, director, officer, owner class of stock or security representing 1% or more of the total out NRS 281A.620.1(f).	n whole standing	or in part, stock or Househo
None			
THE INFORMATION I HAVE PROVIDED	HEREIN IS ACCURATE AND COMPLETE.		
Dale:	Signature:	<u>,</u>	
	Print Name: Seel Hunt /	<u>}</u>	
WHERE TO FILE:	•		
APPOINTED PUBLIC OFFICERS	ELECTED PUBLIC OFFICERS OR CANDIDATES SUBMIT TO:		

SUBMIT TO:

Nevada Commission on Ethics

3476 Executive Pointe Way, Suite 10 Carson City, Nevada 89706 775.687.5469 • 775.687.1279 fax

Nevada Secretary of State, Elections Division 101 North Carson Street, Suite 3 Carson City, Nevada 89701 775.684.5705 • 775.684.5718 fax

Dec. 21. 2009 7:29PM

No. 901 L P. 3 NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS) E C VE D Please read the instruction before completing. Attach additional sheets if necessary.

					COMMI ON ET	
NAME: Scott Huntley	LEN	IGTH OF RESI	DENCE IN NEV	/ADA:	ZG	220
ADDRESS: 12/0 STOKE ROWLE	208					
CITY STATE 710.	LE	IGTH OF RESI ERE REGISTE			5 60	
TELEPHONE: 775 546-3308	1	ιΔΙΙ •	Aynt		nja.ho	a Coi
SECTION A (Public Office): List all public offices for which this and check each box accordingly i.e. annual, candidate or appoint				r ed		
Title of Public Office and Name of Government	Eected, appointed or appointed or appointed to elected (E, A, AE)	Amual Compansallon	Dale elected or appointed	ANNUAL NRS 281A.600.1 & 281A.610.1	CANDODATE NRS 261A.610.1(a).	APPONIMENT NRS 281A-600.1
				Check the	eppropriate b	oxes below
South Lina Haspital Dist	Paint S	0				0
Trustee	\$					
SECTION B (Sources of Income): List each source of your income income in the source of your household who is 18 years of age or older income.			rce listed in l	Section A), or that	of
						ousehold
·						/lember
					Self N	lember ppropriate
Nea &_					Self N	lember ppropriate
Non &					Self N	lember
SECTION C (Real Property): List specific location and particularly which you or a member of your household has a legal or benef	ficial interest; (onal resid	Self M Check the a boxes I	Member appropriate selow
SECTION C (Real Property): List specific location and particular which you or a member of your household has a legal or benefunore; and (3) located in this state or an adjacent state. NRS 28	ficial interest; (arket value o	onal resid	Self M Check the a boxes I	Member appropriate selow
SECTION C (Real Property): List specific location and particula which you or a member of your household has a legal or benef more; and (3) located in this state or an adjacent state. NRS 28	ficial interest; (arket value o	onal resid	Self M Check the a boxes I	Member appropriate selow
SECTION C (Real Property): List specific location and particula which you or a member of your household has a legal or benef more; and (3) located in this state or an adjacent state. NRS 28	ficial interest; (arket value o	onal resid	Self M Check the a boxes I	Member appropriate selow

Name of Public Officer:			
		·~\/^	E. (4)
SECTION D (Creditors): List each creditor to who	m you or a member of your household owes \$5,000 or more r personal residence; and (2) debt on a motor vehicle for per	EXCEP sonal use	I: (1) €
debt secured by mortgage or deed or trust on you retained by seller. NRS 281A.620.1(d).	r personal residence, and (2) deprent a motor version for per	Но	usehold
remined by deficit. The 25 is noticely.	F		lember
		Check the 6	
None			
77.77			
	and the second s	adoregat	le
SECTION E (Gifts): List the gift, identity of donor	and value of each gift if all gifts received are in excess of an taxable year [EXCEPT: (1) a gift received from a person who	is relate	d to
of congenius the third document congenius of all	HUIN, SUU IN CALAMDUISI ONS (ECOIVED ID) 9 DII NIGAY, MEGAN	9:	
anniversary, holiday or other ceremonial occasion	u if the douot does not have a amparament interest in your isa	islative,	
administrative, or political action]. NRS 281A.620	11(e)	Value of G	ift
Gift	\$		
None	\$		
	\$		
	\$		
including a proprietorship, partnership, firm, busi	ess entity (i.e., organization or enterprise operated for econorness, trust joint venture, syndicate, corporation or associations as a trustee, beneficiary of a trust, director, officer, owner in vertices or security representing 1% or more of the total outstated 1A.620.1(f).	vhole or i	n part,
•			Household
		Self	Member e appropriate
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Nega			<u> </u>
3019		ļ	
WITCH THE PROPERTY OF THE PROP	IN IS ACCURATE AND COMPLETE		
THE INFORMATION I HAVE PROVIDED HERE	IN 13 ACCURATE AND COM LETE		
Date: 2/20/2009	Signature:		
	Print Name: Sett Huntle)/	
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WHERE TO FILE:	ELECTED PUBLIC OFFICERS OR CANDIDATES		
APPOINTED PUBLIC OFFICERS SUBMIT TO:	SUBMIT TO:		
Nevada Commission on Ethics	Nevada Secretary of State, Elections Division 101 North Carson Street, Suite 3		
3476 Executive Pointe Way, Suite 10 Carson City, Nevada 89706	Carson City, Nevada 89701		
775.687.5469 • 775.687.1279 fax	775.684.5705 • 775.684.5718 fax		

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